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Attention:	Group Art Unit: 1745	From:	Travis Dodd
Faxı	571-273-8300	Faxi	818-833-2065
Phones		Phonei	818-833-2014
Companyi	U.S. Patent and Trademark Office	Company:	Quallion LLC
		Pages:	Total of (13) Pages
Réi	Application Serial No.: 10/665,509 Title: ELECTRIC STORAGE BATTERY CONSTRUCTION AND METHOD OF MANUFACTURE	Date:	December 20, 2006
	Filed: September 17, 2003 Examiner: Dah-Wei D. Yuan		
	Group Art Unit: 1745		•
	Attorney Docket No.: Q137-US9		

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Amendment Transmittal Letter (2 page)
Fee Transmittal (in duplicate) (2 pages)
Amendment (7 pages)
Form PTO-2038 Credit Card Authorization (1 page)

Lisa K. Robbins

(Name of Person Signing Certificate)

(Signature)

#### Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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### TRANSMITTAL **FORM**

(to be used for all correspondence after initial filling)

**Application Number** 10/665,509 September 17, 2003 **Filing Date** First Named Inventor Hisashi Tsukamoto et al. **Group Art Unit** 1745 RECEIVED Examiner Name

Total Number of Pages in This Submission Attorney Docket Number Q137-US9

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Dah-Wei D. Yuagentrau FAX CENTER

ENCLOSURES (check all that apply) **Assignment Papers** After Allowance Communication Fee Transmittàl Form (for an Application) to Group Appeal Communication to Board of Appeals and Interferences Fee Authorized Drawing(s) Appeal Notice, Brief, Reply Brief) Amendment Licensing-related Papers Petition to Covert to a Provisional After Final Proprietary Information **Application** Power of Attorney, Revocation Change of Correspondence Address Affidavits/declaration(s) Status Letter Other Enclosure(s) Extension of Time Request Terminal Disctalmer (please identify below); Express Abandonment Request Request for Refund CD, Number of CD(a) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Perts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 31815 Customer Number or Ber Code Label (Insert Customer No. or Attach bar code lebel here) The Commissioner is hereby authorized to charge any additional fees which may be required, No. 50-0921. A duplicate copy of this street is enclosed. Respectfully submitted, Dated: 12/20/2008 Phone: (818) 833-2003 Travis Dodd Attorneys for Applicant(s) Fax: (818) 833-2065 P.O. Box 923127 Sylmar, CA 91392-3127

	CERTIFIC	CATE OF MAILING	And the same	
mail	this correspondence is being deposited will essed to: Commissioner of Patents and T			•
Týped or printed name TRAVIS DODD				
Signature			Date	

Typed or printed

name

Signature

TRAVIS DODD

# TRANSMITTAL **FORM**

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Total Number of Pages in This Submission

10/665,509 **Application Number** September 17, 2003 Filing Date First Named Inventor Hisashi Tsukamoto et al. 1745 **Group Art Unit Examiner Name** Dah-Wel D. Yuan Attorney Docket Number Q137-US9

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	NCLOSURES (check all that apply)	
x Fee Transmittel Form	Assignment Papers (for an Application)	After Allowance Communication to Group
x Fee Authorized	Drawing(s)	Appeal Communication to Boar of Appeals and Interferences
X Amendment	Licensing-related Papers	Appeal Communication to Group (Appeal Natice, Brief, Reply Brief)
After Final	Petition to Covert to a Provisional Application	Proprietary Information
Affidávits/déclaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter
Extension of Time Request	Terminal Olectaimer	Other Enclosure(s) (please Identify below):
Express Abandonment Request	Request for Refund	
Information Disclosure Statement	CD, Number of CD(s)	
	Remarks	
Certified Copy of Priority Document(s)		•
Response to Missing Parts/ Incomplete Application		
Response to Missing Parts under 37 CFR 1.52 or 1.53	·	
Customer Number or Ber Code Label	31815 (Insert Customer No. or Attach bar code label here)	
The Commissioner is hereby authorized to charon	a any additional fees which may be required, or credit an	y overpayment to Deposit Account
No. 50-0921. A duplicate copy of this sheet is end  Dated: 12/20/2006	Respectfully submitted,	
No. 50-0921. A duplicate copy of this sheet is end  Dated: 12/20/2006  Phone: (818) 833-2003	Respectfully submitted,	
No. 50-0921. A duplicate copy of this sheet is en	By:  Travis Dodd  Attorneys for Applicant( P.O. Box 923127	

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Date

#### FEE TRANSMITTAL

Attorney Docket No.	Q137-US9	
First Named Inventor:	TSUKAMOTO, Hisashi	
Application Number	10/665,509	
Filing Date:	September 17, 2003	
Examiner Name:	1745	•
Group/Art Unit:	Dah-Wei D. Yuan	

TOTAL AMOUNT OF PAYMENT:	\$ 100.00
METHOD OF PAYMENT (check One)	1- X The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:
	Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC
	_X Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
······································	2X Payment Enclosed: Check Money Order X Other - Credit Card

2. UTILITY Basic Filing Fee & Claims

(1) För	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	ХX	xx	\$300.00	\$150.00	\$.00
Total Claims	24 - 20=	4	X \$50.00	X \$25.00	\$100.00
Independent Claims	1-3=	0	X \$200.00	X \$100.00	\$.00
Multiple Dependent Claim(s) (if applicable) \$360.00 \$180.00				\$.00	
Total of above Calculations =					\$100.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 350.00	\$ 175.00	\$.00
Reissué filing fee	\$ 790.00	\$ 395.00	\$.00
Provisional filing fee	\$ 160.00	\$ 80.00	\$.00
	Total of ab	ove Calculations =	\$.00

3. ADDITIONAL PEES

Fee Description	Large Entity	Small Entity	Other
	S	\$	S
· · · · · · · · · · · · · · · · · · ·	5	S	5
	\$	S	S
		S	S
		TOTAL	: S

Name (print/type)	TRAVIS L. DODD	Registration N (Attorney/Age		42,491
Signature		Date	12/20/	2006

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#### FEE TRANSMITTAL

QUALLION LEGAL

Aftorney Docket No.	Q137-US9	
First Named Inventor:	TSUKAMOTO, Hisashi	
Application Number	10/665,509	
Filing Date:	September 17, 2003	
Examiner Name:	1745	
Group/Art Unit:	Dah-Wei D. Yuan	

\$ 100.00
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Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC
X. Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
2. X Payment Buclosed: Check Money Order X Other - Credit Card

2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	xx	XX	\$300.00	\$150.00	\$.00
Total Claims	24 – 20=	4	X \$50.00	X \$25.00	\$100.00
Independent Claims	1 - 3 =	0	X \$200.00	X \$100.00	\$.00
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Total of above Calculations =		\$.00	

3. ADDITIONAL FEES

Fee Description	Large Rotity	Small Entity	Other	
	\$	S	\$	
•	3	\$	S	
		\$	S	
	S	S	\$	
		TOTAL	: \$	

Name (print/type)	TRAVIS L. DODD	Registration No.: 42,491 (Attorney/Agent)		42,491
Signature		Date	12/20/	2006